

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/980098

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*					
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1											
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TOTAL IND.	4	↓		↓		↓						
TOTAL DEP.	2							↓		↓		↓
TOTAL CLAIMS	6											
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TOTAL CLAIMS												

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3831

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